

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>2. Print your name and address on the reverse so that we can return the card to you.</p> <p>3. Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>4. Signature of Addressee (Print Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>5. Date of Delivery</p>	
<p>1. Article Addressed to:</p> <p>MARK MILLER EXPECTATIONS 10116 S WASATCH BLVD SANDY UT 84094</p>		<p>6. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>JB DOGM M/035/024 4/20/05</p>		<p>7. Service Type: <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Restricted Delivery (Yes/No) <input type="checkbox"/> Yes</p>	
<p>2. Article Number: 7002 0510 0003 8603 3530</p>			
<p>3. Period of Validity: 0011</p>		<p>4. Date of Return Receipt: 402395-02-M-1540</p>	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
<p>JB DOGM M/035/024 4/20/05</p>	
<p>Postage \$</p> <p>Certified Fee</p> <p>Return Receipt Fee (Endorsement Required)</p> <p>Restricted Delivery Fee (Endorsement Required)</p> <p>Total Postage & Fees \$</p>	<p>Penalty Reassessment</p> <p>Postmark Here</p>
<p>Sent To</p> <p>MARK MILLER - EXPECTATIONS</p> <p>Street, Apt. No., or PO Box No. 10116 S WASATCH BLVD</p> <p>City, State, ZIP+4 SANDY UT 84094</p>	
<p>PS Form 3800, January 2001 See Reverse for Instructions</p>	

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